

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09492507		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			•		•	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/		/				51		/		
2		/		/			52		/		
3		/		/			53		/		
4		/		/			54		/		
5		/		/			55		/		
6		/		/			56		/		
7		/		/			57		/		
8		/		/			58		/		
9		/		/			59		/		
10		/		/			60		/		
11		/		/			61		/		
12		/		/			62		/		
13		/		/			63		/		
14		/		/			64		/		
15		/		/			65		/		
16		/		/			66		/		
17		/		/			67		/		
18		/		/			68		/		
19		/		/			69		/		
20		/		/			70		/		
21		/		/			71		/		
22		/		/			72		/		
23		/		/			73		/		
24		/		/			74		/		
25		/		/			75		/		
26		/		/			76		/		
27		/		/			77		/		
28		/		/			78		/		
29		/		/			79		/		
30		/		/			80		/		
31		/		/			81		/		
32		/		/			82		/		
33		/		/			83		/		
34		/		/			84		/		
35		/		/			85		/		
36		/		/			86		/		
37		/		/			87		/		
38		/		/			88		/		
39		/		/			89		/		
40		/		/			90		/		
41		/		/			91		/		
42		/		/			92		/		
43		/		/			93		/		
44		/		/			94		/		
45		/		/			95		/		
46		/		/			96		/		
47		/		/			97		/		
48		/		/			98		/		
49		/		/			99		/		
50		/		/			100		/		
TOTAL IND.							TOTAL IND.				
TOTAL DEP.							TOTAL DEP.				
TOTAL CLAIMS							TOTAL CLAIMS				

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. 096 92807 APPLICANT(S)		FILING DATE		
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			•		•	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
101	1		1				151				
102		1		1			152				
103		1		1			153				
104		1		1			154				
105		1		1			155				
106		1		1			156				
107		1		1			157				
108		1		1			158				
109		1		1			159				
110	1						160				
111		1		1			161				
112		1		1			162				
113	1						163				
114	1						164				
115	1						165				
116		1		1			166				
117		1		1			167				
118		1		1			168				
119	1		1				169				
120		1		1			170				
121	1		1				171				
122		1		1			172				
123		1		1			173				
124		1		1			174				
125		1		1			175				
126		1		1			176				
127		1		1			177				
128		1		1			178				
129		1		1			179				
130		1		1			180				
131							181				
132							182				
133							183				
134							184				
135							185				
136							186				
137							187				
138							188				
139							189				
140							190				
141							191				
142							192				
143							193				
144							194				
145							195				
146							196				
147							197				
148							198				
149							199				
150							200				
TOTAL IND.	19						TOTAL IND.				
TOTAL DEP.	111						TOTAL DEP.				
TOTAL CLAIMS	130						TOTAL CLAIMS				

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO. <b>0949207</b>	FILING DATE			
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
201	1						51				
202		1					52				
203		1					53				
204		1					54				
205		1					55				
206		1					56				
207		1					57				
208		1					58				
209		1					59				
210	1						60				
211		1					61				
212		1					62				
213	1						63				
214	1						64				
215	1						65				
216		1					66				
217		1	1				67				
218		1					68				
219	1		1				69				
220		1					70				
221	1						71				
222		1					72				
223		1					73				
224		1					74				
225		1					75				
226		1					76				
227		1					77				
228		1					78				
229		1					79				
230		1					80				
231							81				
232							82				
233							83				
234							84				
235							85				
236							86				
237							87				
238							88				
239							89				
240							90				
241							91				
242							92				
243							93				
244							94				
245							95				
246							96				
247							97				
248							98				
249							99				
250							100				
TOTAL IND.	19		31				TOTAL IND.				
TOTAL DEP.	111		155				TOTAL DEP.				
TOTAL CLAIMS	130		186				TOTAL CLAIMS				